

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000059637

Entity Name: PRECISION DRILLING, INC.

FILED
Jan 23, 2005
Secretary of State

Current Principal Place of Business:

110 MARSHALL CIRCLE
ST. AUGUSTINE, FL 32086 US

New Principal Place of Business:

Current Mailing Address:

110 MARSHALL CIRCLE
ST. AUGUSTINE, FL 32086 US

New Mailing Address:

FEI Number: 65-0681093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELENDEZ, SANDRA T
2407 TOMMY AVENUE
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

LYNCH, BARBARA Z
30 HAWAIIAN BLVD.,
ST. AUGUSTINE, FL 32080 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BARBARA LYNCH

01/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, LEWIS
Address: 421 MACKENZE CIRCLE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: V () Delete
Name: HAUGE, ERLING
Address: 18991 OUTRIGGER LANE
City-St-Zip: JUPITER, FL 33458

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAUGE, ERLING
Address: 1891 OUTRIGGER LANE
City-St-Zip: JUPITER, FL 33458

Title: V (X) Change () Addition
Name: LYNCH, THOMAS J
Address: 30 HAWAIIAN BLVD.,
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: TRES () Change (X) Addition
Name: LYNCH, BARBARA
Address: 30 HAWAIIAN BLVD.,
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA LYNCH

TRES

01/23/2005

Electronic Signature of Signing Officer or Director

Date